



Express Mail Label  
No. EL 966216700 US

Patent Application

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. of: Stinson, Jonathan S. Art Group: 3731  
Serial No.: 10/038,640 Examiner: Bradford C. Pantuck  
Filed: January 4, 2002 Atty. Docket: 23,369-110  
For: Prostheses Implantable in Enteral Vessels

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TRANSMITTAL

Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Enclosed for filing are the following items:

1. Request for Continued Examination (RCE) under 37 C.F.R. 1.114;
2. Amendment Accompanying Request for Continued Examination (17 pages),  
consisting of cover page (1 page), listing of the claims (9 pages) and remarks (7 pages);
3. Request for Extension of Time (2 pages);
4. Fee Transmittal FY2005;
5. Check in the amount of \$790.00 in payment of the filing fee;
6. Check in the amount of \$900.00 in payment of the time extension fee; and
7. Return receipt postcard.

The Commissioner is authorized to charge any further fees necessitated by this correspondence, or credit any overpayment, to Deposit Account No. 12-0449.


Prosecution in this application is closed, the previous (March 2, 2005) action being a final action.

Please direct any questions regarding this correspondence to the undersigned at the address and telephone number indicated below.

Respectfully submitted,

Boston Scientific Scimed, Inc.

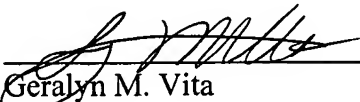
Date: September 2, 2005

By:   
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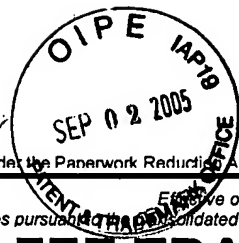
#### CERTIFICATE OF EXPRESS MAILING

Pursuant to 37 CFR 1.10, I hereby certify that this Transmittal and accompanying papers in U.S. Application Serial No. 10/038,640 and accompanying papers are being deposited with the U.S. Postal Service by Express Mail, Post Office to Addressee service, addressed to: Mail Stop RCE, Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450, on the date of deposit and under the mailing label number indicated below.

Date of Deposit: September 2, 2005

  
Geraldyn M. Vita

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PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 1,690.00 (2 checks)**Complete if Known**

Application Number	10/038/640
Filing Date	January 4, 2002
First Named Inventor	Jonathan S. Stinson
Examiner Name	Bradford C. Pantuck
Art Unit	3731
Attorney Docket No.	23,369-110

**METHOD OF PAYMENT** (check all that apply)☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☐ Deposit Account Deposit Account Number: 12-0449 Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, **except for the filing fee**☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
50	25

Each independent claim over 3 (including Reissues)

200	100
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Multiple dependent claims

360	180
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Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

**Fees Paid (\$)**

Other (e.g., late filing surcharge): Filing fee (RCE) (\$790.00) and Extension Fee (900.00)

1,690.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 27,717	Telephone 952-896-1574
Name (Print/Type)	Frederick W. Niebuhr	Date September 2, 2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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